# REPORT OF RECEIPTS AND EXPENDITURES
## OF A POLITICAL COMMITTEE

### INSTRUCTIONS:
Please type or print legibly in black ink all information on this form. For assistance in completing this form, see instructions on the reverse side.

**IS THIS AN AMENDMENT?** □ Yes \(\checkmark\) No

## COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) □ Check if this is a new name
   - Committee To Re-Elect Sherron Freeman

2. Acronym or Abbreviated Name (if any)
   -

3. Committee Telephone Number
   - (317) 826-4372

4. Mailing Address (address where all campaign finance correspondence is received) □ Check if this is a new address
   - 10628 Bartley Drive

5. City, State, ZIP Code
   - Lawrence, IN. 46236-8389

6. Party Affiliation (if applicable)
   - Democratic

## CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)
   - Sherron Freeman

8. Party Affiliation or If Independent Candidate
   - Democratic

9. Office Sought (Include district number, if any. Not required for exploratory committee.)
   - Lawrence Common Council District 3

10. County of Residence
    - Marion

## TYPE OF REPORT

11. Check one:
   - Pre-Primary □ Pre-Election \(\checkmark\) Annual □ Nomination □ Other □
   - Final/Disbands Committee (lines 16, 19, and 20 must be 0) □ Outgoing Treasurer (within 10 days amend Statement of Organization)

12. Reporting Period:
   - From: 10-11-14 Through: 12-31-14
   - Cash on hand and investments at the beginning of this reporting period. $123.00
   - Cash on hand and investments January 1, current year.

## CONTRIBUTIONS AND RECEIPTS

15a. Itemized (use Schedule A)

15b. Unitemized

15c. Add lines 15a and 15b in both columns

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B

## EXPENDITURES

17a. Itemized (use Schedule B) (Public Question: use Schedule C)

17b. Unitemized

17c. Add lines 17a and 17b in both columns

18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) $173.00

## CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer: ◆
   - Title: Treasurer
   - Date: 1-20-15

Signature of Candidate (if applicable)
   - Sherron R. Freeman
   - Date: 1-17-15

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-1) A person who knowingly files a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor. (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

**FILED**

JAN 20 2015

Myla A. Eldridge